VTE Improvement Update

July 19, 2019

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Hospital QI and Patient Safety Committee

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Outline

Why are VTE failures happening?

Addressing Lapses in Ordering

Improving Implementation Processes

Documenting compliance

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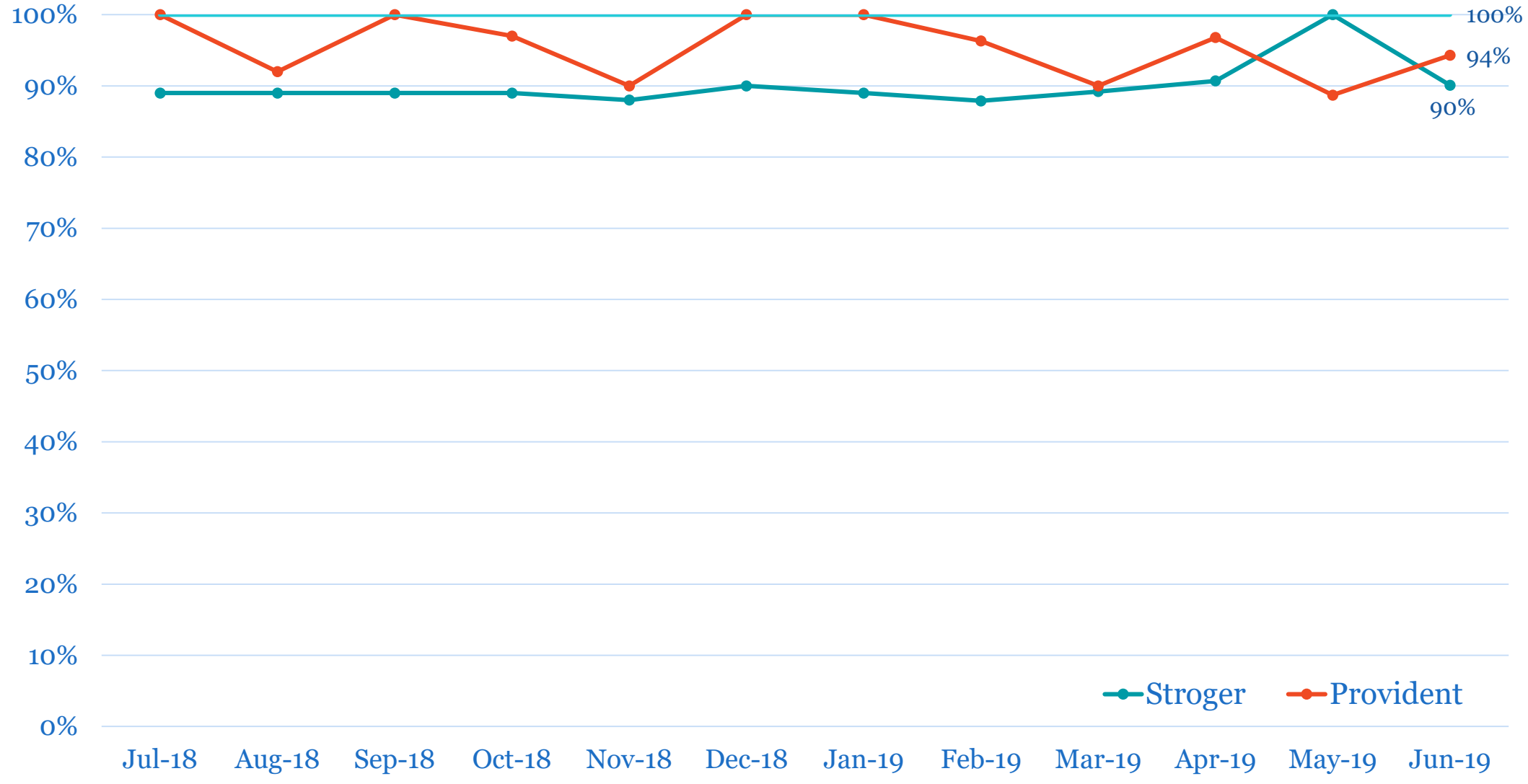
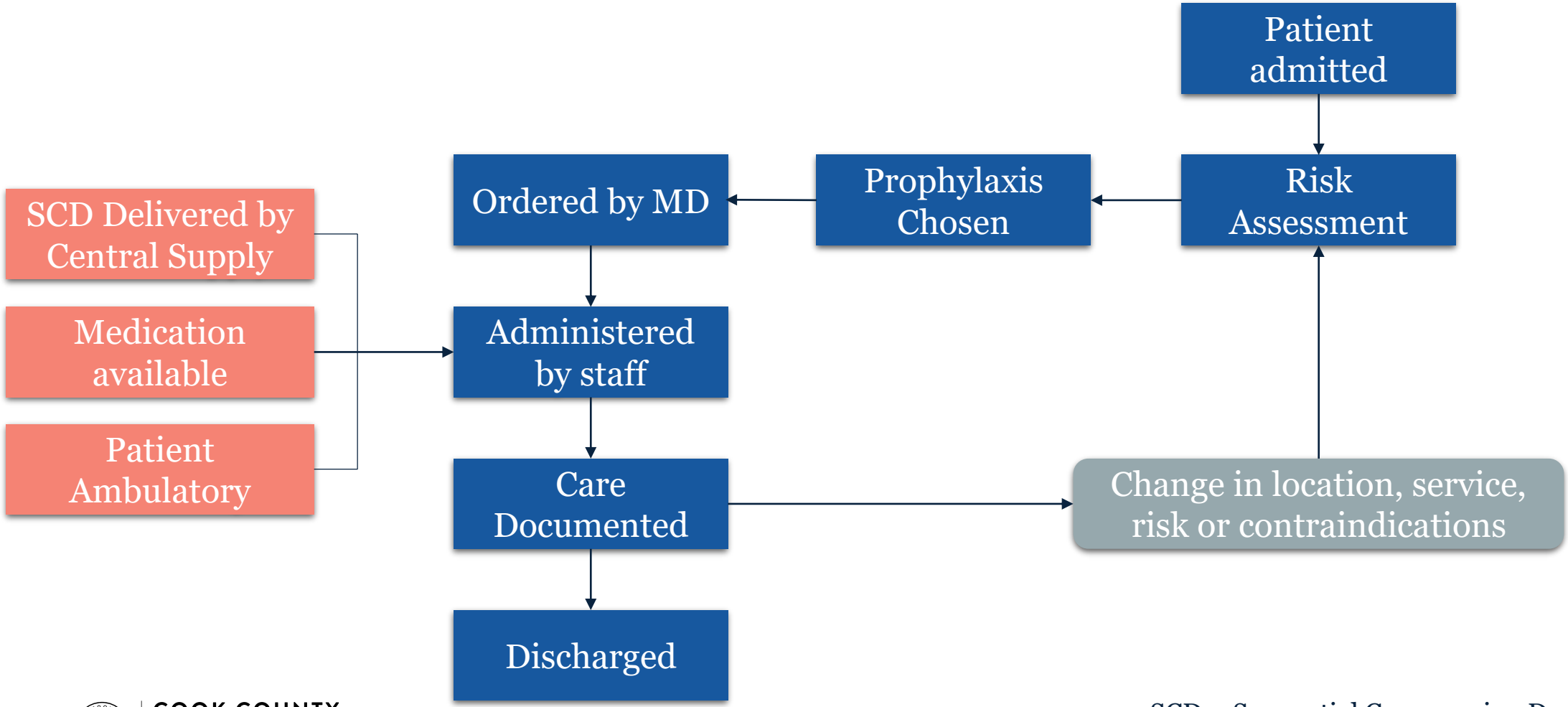
Core Measure – Venous Thromboembolism (VTE) Prevention



Source: Quality Dept.

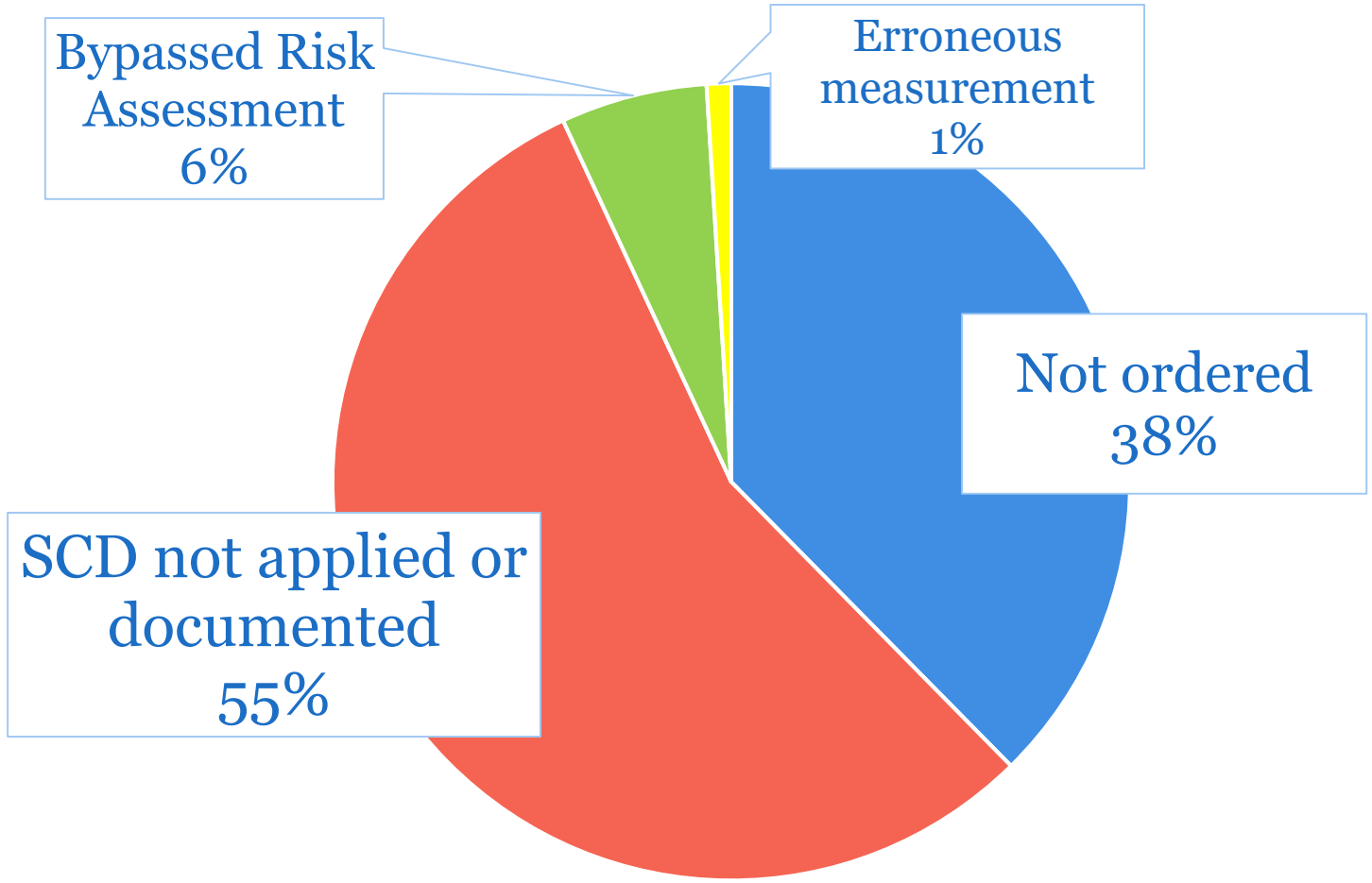
VTE Process Map



SCD = Sequential Compression Device

VTE = Venous Thromboembolism

Why are VTE failures happening?



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Addressing Lapses in Risk Assessment and Ordering

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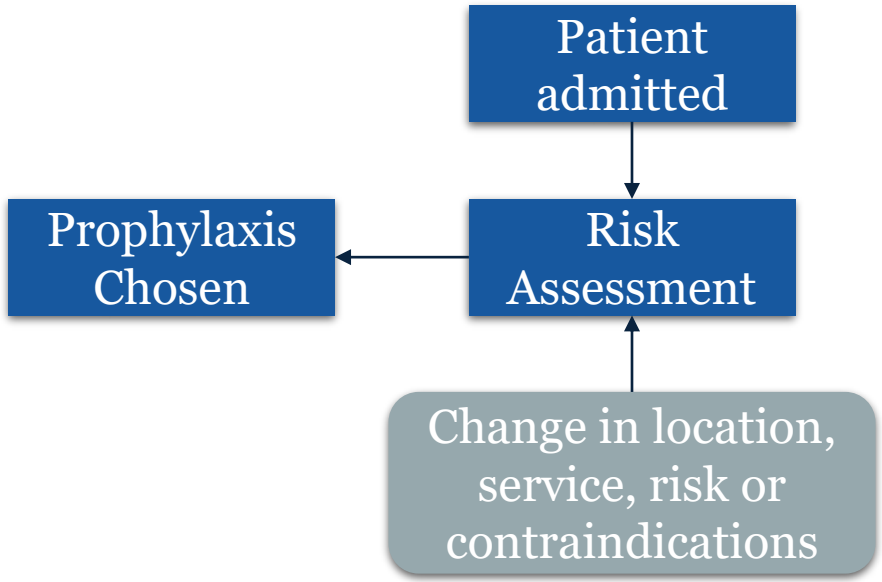
Ensuring Risk Assessment

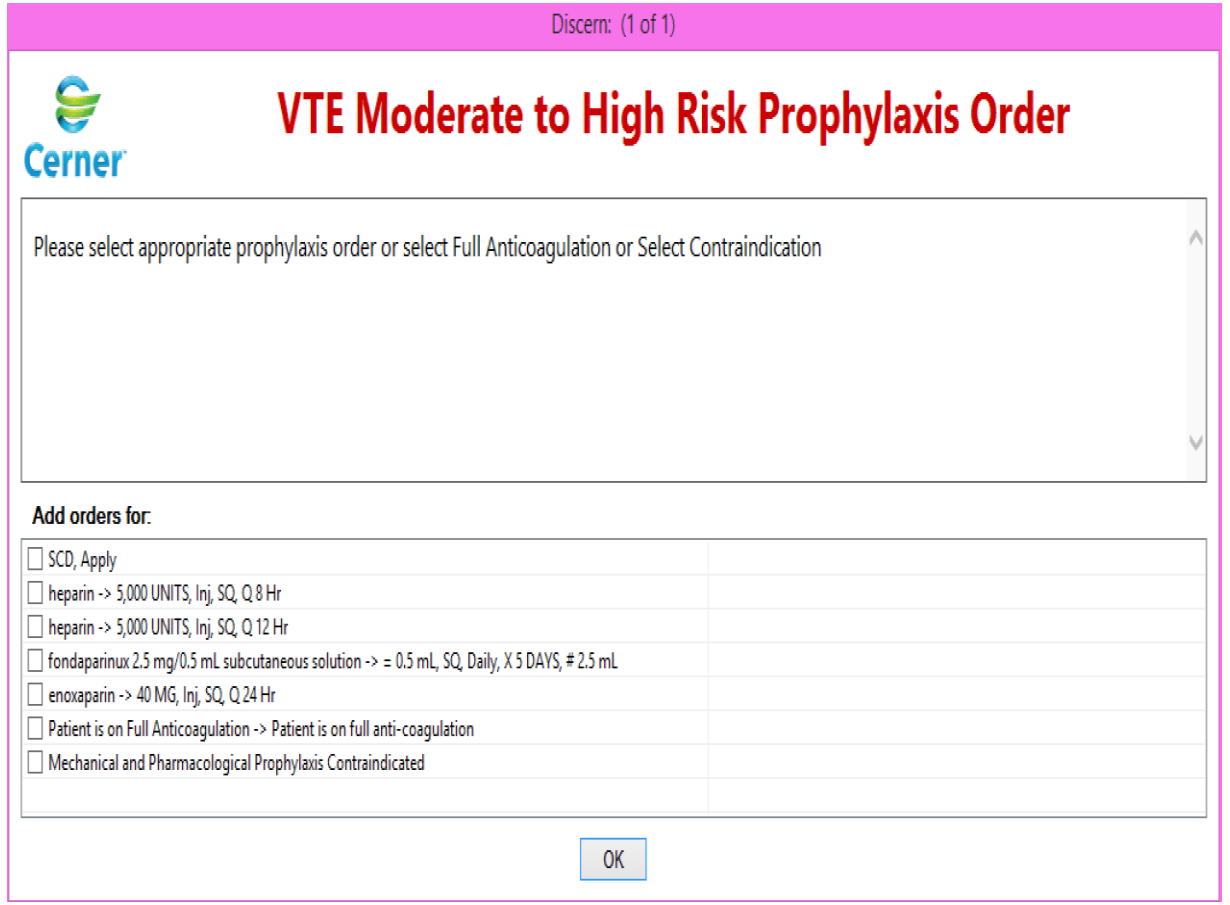
- Triggered by all admission order sets
- Triggered on transfers of care
- Triggered when prior prophylaxis cancelled



Requiring Prophylaxis

Ordered by MD ← Prophylaxis Chosen

- Orders required regardless of risk
- Low Risk: Ambulate order
- Moderate to high risk:
  - Pharmacologic OR
  - Sequential Compression Device OR
  - Reason for no VTE Prophylaxis given

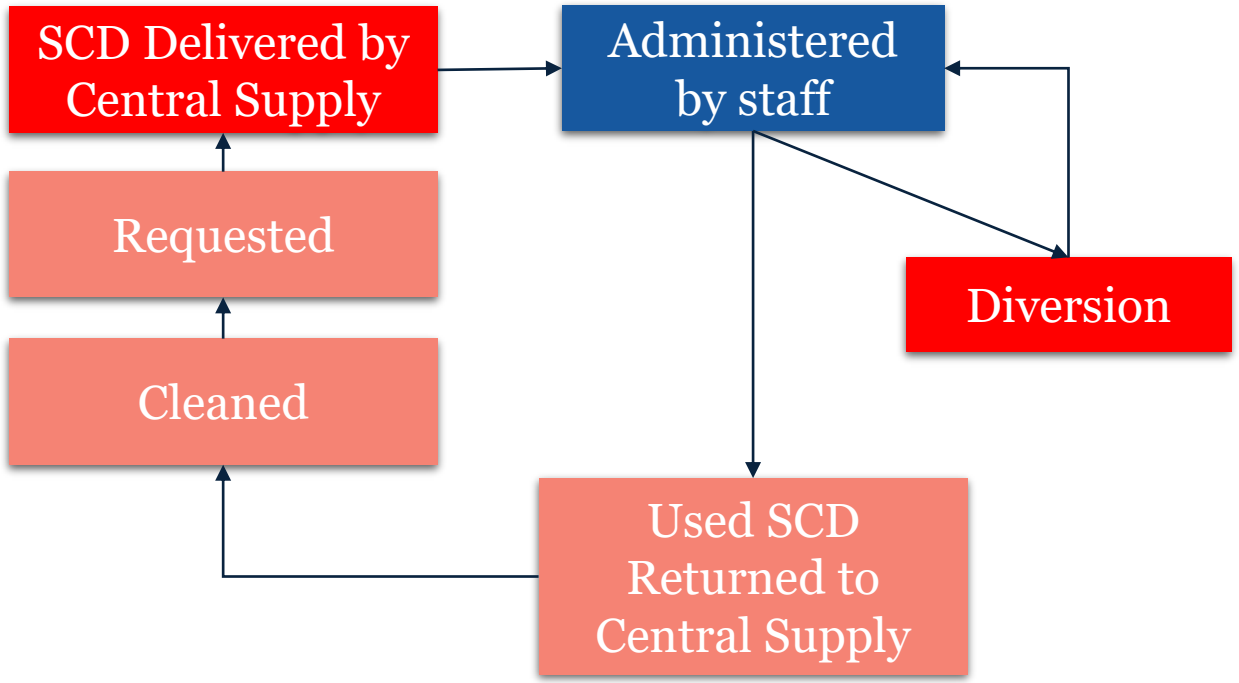


Administrating Prophylaxis: SCD Failures

- Accounts for 56% of VTE Failures

- High Compliance Nursing Units:
  - One bed = One SCD device
  - Culture of SCD documentation

- Low Compliance Units:
  - SCD not on unit
  - Erratic delivery from central supply
  - Irregular documentation practices



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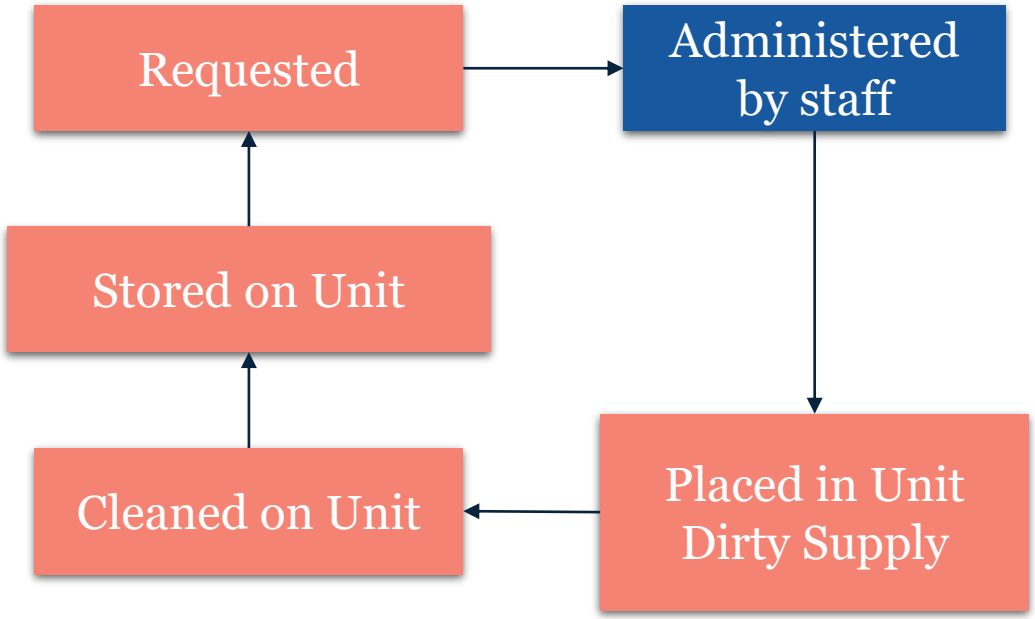
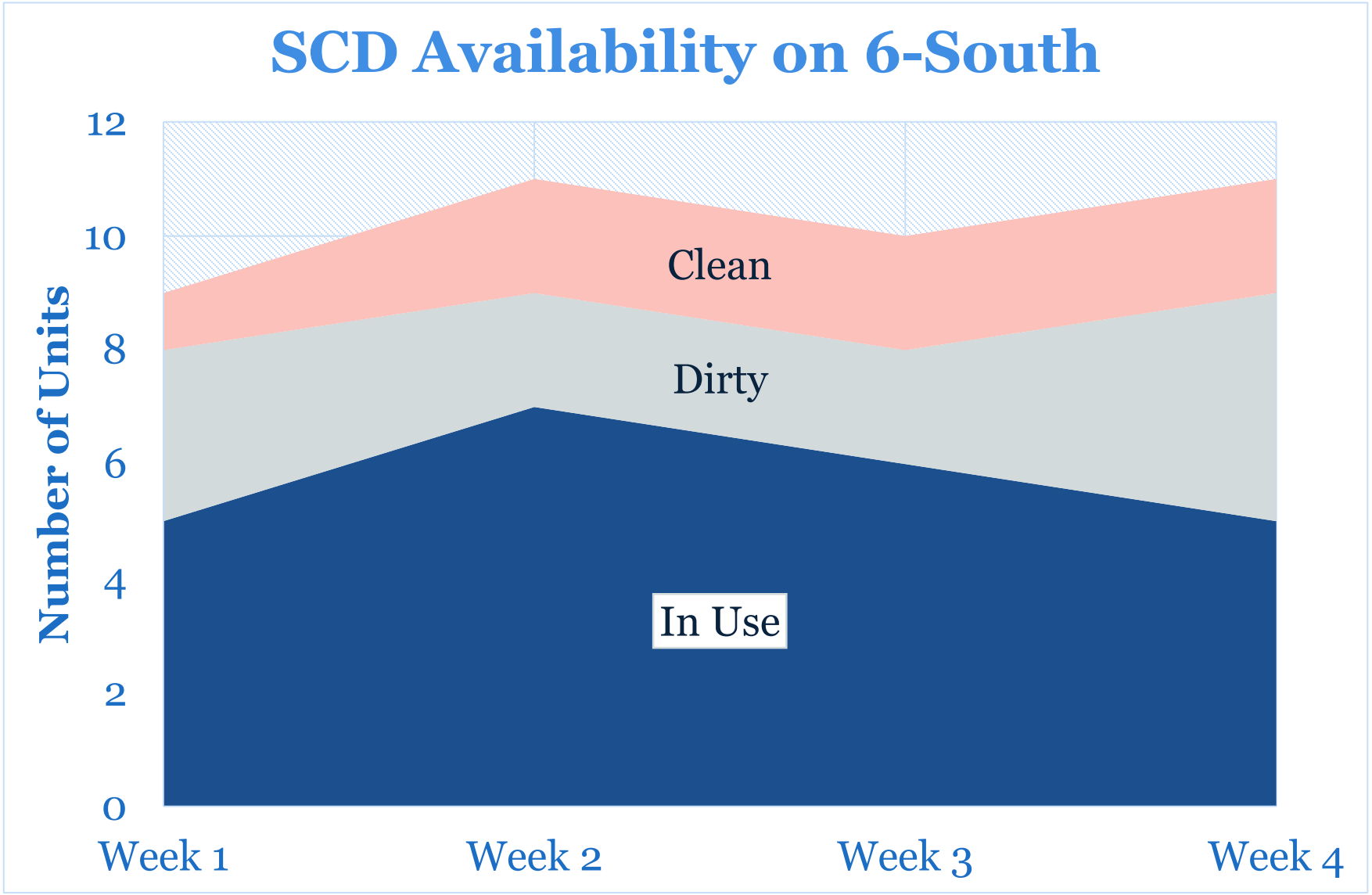
Goal: Increasing SCD Availability

- Pilot between Central Supply and Nursing
- Minimum number of SCDs assigned to unit
- SCDs cleaned onsite
- Returned to Charge RN for storage



Results



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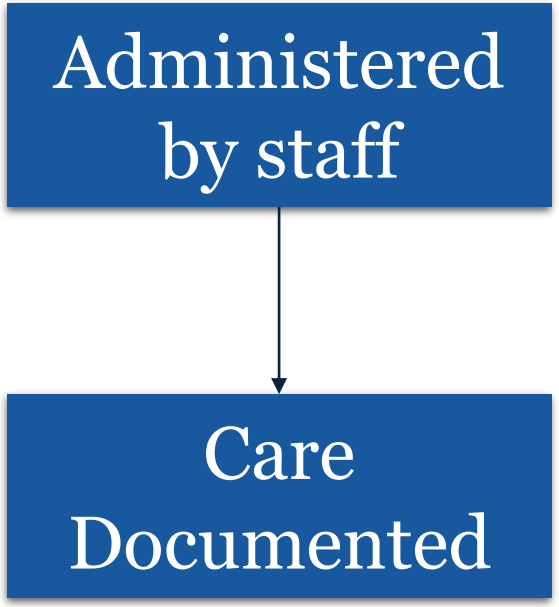
Results

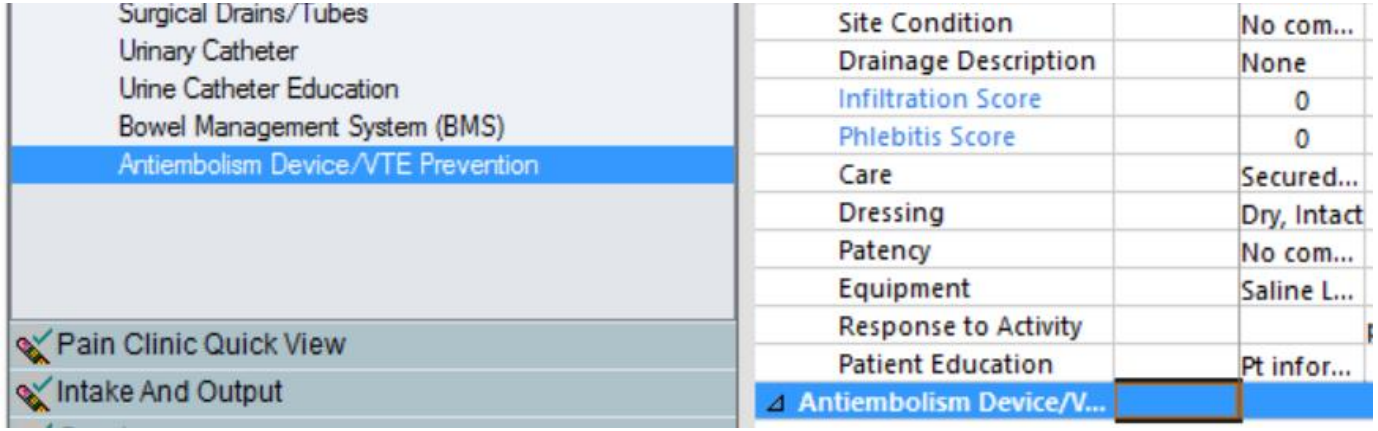
- Clean SCDs always available

- New process preferred by:
  - 2/2 Charge RNs
  - 3/3 Floor RNs
  - Central Supply

- Overall 6-South VTE Compliance unchanged



Improving Documentation



Forced SCD documentation every 8 hours

Required documentation in notes

- * Assessment and Plan

Assessment and Plan	A&P: OTHER Diagnosis: Dx Code Search / OTHER Orders: Order Profile / OTHER
DVT Prophylaxis	Subcutaneous heparin / Enoxaparin / SCD boots
Education and Follow-up	Counseled: Patient / Family / Friend / Diagnosi Patient Instructions: Patient Education / OTHER
* Length of Stay	* Anticipated Discharge Date: * === * Rationale for continued hospitalization: * OTHER

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Challenges

- Electronic Health Record rules are complex
- Competing Information Services demands
- Not enough SCDs to guarantee 10 per med/surg unit
- Central Supply staffing inconsistencies

Next Steps

- Enable EHR Changes (Tentative August 2019)
- Expand 6-South pilot to other med/surg units
- Additional 60 SCD machines requested
- Monitor compliance in real-time

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Questions/Comments?

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Thank you

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